

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AS		6/29/99
O.I.P.E. CLASSIFIER		5	1-2-5/9
FORMALITY REVIEW	DM	72223	7/14/97 8/19/97

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 (Through numeral) ... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/13/97
2	✓	✓	12/05/97
3	✓	✓	05/03/98
4	✓	✓	06/07/98
5	✓	✓	03/22/98
6	✓	✓	06/22/98
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	7/13/97
52	✓	✓	12/05/97
53	✓	✓	05/03/98
54	✓	✓	06/07/98
55	✓	✓	03/22/98
56	✓	✓	06/22/98
57	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
102	✓	✓	
103	✓	✓	
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106	✓	✓	
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145	✓	✓	
146	✓	✓	
147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)